

County of the Soke of Peterborough

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER

FOR THE YEAR

1953

G. NISBET, M.B., Ch.B.(Ed.), D.P.H., R.C.S.(Ed.)

County of the Soke of Peterborough

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER

FOR THE YEAR

1953

G. NISBET, M.B., Ch.B.(Ed.), D.P.H., R.C.S.(Ed.)

COUNTY OF THE SOKE OF PETERBOROUGH

MEMBERS OF THE COUNTY HEALTH COMMITTEE

(As constituted at 31st March, 1954)

SIR ARTHUR CRAIG

(Chairman of the County Council)

(*ex-officio*)

COUNTY ALDERMAN DR. J. HUNT

(Vice-Chairman of the County Council)

(*ex-officio*)

Chairman :—

COUNTY ALDERMAN G. T. VAWSER

Vice-Chairman :—

COUNTY COUNCILLOR P. ADAMS

COUNTY ALDERMAN MRS. M. C. COOK

COUNTY COUNCILLORS

MRS. E. M. AMIES

G. W. S. BURDETT

MRS. D. COX.

S. G. GASCOINE

C. GREENWOOD

MRS. A. PHILPOT

MRS. E. E. L. SAVAGE

C. E. WATKINS

MRS. F. WREN

Co-Opted Members :—

DR. R. M. E. SMITH

DR. J. N. COLLINS

MISS M. E. PERCIVAL

J. N. STATON, L.D.S., R.C.S.(ENG.)

CONTENTS

Section I

Statistics and Social Conditions

General Statistics	...	...	...	...	...	...	...	...
Extracts from Vital Statistics			...	...	...	...	...	...
Chief Causes of Death	...	...	...	...	...	...	...	...
Births	...	...	...	...	...	...	...	...
Stillbirths	...	...	...	...	...	...	...	...
Infant Mortality	...	...	...	...	...	...	...	...
Deaths	...	...	...	...	...	...	...	...

Section II

General Provision of Health Services in the Area

Administration	...	...	...	...	...	...	...
Care of Mothers and Young Children	...	...	...	...	...	...	...
Midwives Service	...	...	...	...	...	...	...
Health Visiting	...	...	...	...	...	...	...
Home Nursing	...	...	...	...	...	...	...
Vaccination and Immunisation	...	...	...	...	...	...	...
Ambulance Service	...	...	...	...	...	...	...
Prevention of Illness, Care and After-Care	...	...	...	...	...	...	...
Domestic Help Service	...	...	...	...	...	...	...
Mental Health Service	...	...	...	...	...	...	...
Handicapped Persons	...	...	...	...	...	...	...

Section III

Prevalence of, and Control over, Infectious and Other Diseases

Notifiable Diseases	...	...	...	...	...	...	...
Tuberculosis...	...	...	...	...	...	...	...
Venereal Diseases	...	...	...	...	...	...	...

Section IV

Inspection and Supervision of Food

Report of Inspector

HEALTH DEPARTMENT STAFF — 1953

County Medical Officer of Health

GEORGE NISBET, M.B., Ch.B.(ED.), D.P.H., R.C.S.(ED.)

Deputy County Medical Officer of Health

WILLIAM D. SWINNEY, M.B., Ch.B., D.P.H.

Superintendent Nursing Officer

MISS I. SYLVESTER, S.R.N., S.C.M.,
H.V. CERT.

Health Visitors

MISS M. MCPHILLIPS, S.R.N., C.M.B.

MISS M. JULYAN, S.R.N., S.C.M., H.V. Cert.

MRS. M. PARSON, S.R.N., S.C.M., H.V. Cert.

MISS J. SHARPE, S.R.N., B.T.A., H.V. Cert.

Tuberculosis Health Visitor

MISS E. E. WAGSTAFF, S.R.N.

Clinic Nurse

MISS J. M. MACPHAIL, S.R.N., S.R.F.N.,
S.C.M.

Home Help Organiser

MISS JOAN WARWICK, T.D.

Blind Welfare Visitor and Home Teacher (Peterborough Blind Association)

MISS M. H. P. WHITE, S.R.N.

Lay Administrative Officer and Chief Clerk

JOHN J. DUNFORD.

Duly Authorised Officer

JAMES A. WARREN.

DISTRICT MEDICAL OFFICERS OF HEALTH AND SANITARY INSPECTORS

District	Medical Officer of Health	Sanitary Inspector
City of Peterborough	WILLIAM D. SWINNEY, M.B., Ch.B., D.P.H.	J. HALL, M.S.I.A., CERT. R. SAN. I., A.M.I.SAN.E.
Peterborough Rural District	W. ANLEY HAWES, M.B., D.P.H. (<i>part-time appointment</i>)	C. GREEN, M.S.I.A., A.R SAN.I.
Barnack Rural District	W. ANLEY HAWES, M.B., D.P.H. (<i>part-time appointment</i>)	D. W. GRIFFITHS, M.S.I.A., A.R SAN.I.

COUNTY COUNCIL OF THE SOKE OF PETERBOROUGH

To : The Chairman and Members of the County Council
of the Soke of Peterborough.

LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health service for the year 1953.

There have been no major changes in staff, and the health services have continued to run smoothly.

The Vital Statistics, which give an indication of the general well-being of the community, may be regarded as satisfactory. The Death Rate, Infant Mortality and Stillbirth rate compare favourably with the country as a whole.

Tuberculosis is no longer a major "killing" disease, and in 1953 the death rate from respiratory tuberculosis in this County reached the remarkably low figure of 0.06 per 1,000 of the population, the previous lowest rate being 0.1 in 1952. This is less than one-third of the rate of that of the country as a whole. There was a reduction in the number of cases of tuberculosis notified in 1953, viz., 53 compared with 84 in 1952.

The number of cases of infectious disease notified in the County showed great reduction—from 2,016 in 1952 to 379 in 1953.

Increasing demand is being made both upon the Ambulance and Home Help Service, and it is necessary to keep both these services under careful scrutiny. Early in 1954 an Assistant Part-time Home Help Organiser was appointed.

This Report is divided into four main sections, as follows :—

- Section I. Statistics and Social Conditions.
- Section II. Provision of Health Services.
- Section III. Prevalence of, and Control over, Infectious Diseases.
- Section IV. Inspection and Supervision of Food.

I wish once again to express my thanks to the Chairman and Members of the County Health Committee for their support; to members of my staff (both professional and lay), for their continued loyal service during the year; to my Lay Administrative Officer—Mr. Dunford—for his assistance in the preparation of this Report, and to Mr. Warren for compiling the Mental Health Section of the Report.

I have the honour to be,

Your obedient Servant,

GEORGE NISBET,

County Medical Officer

County Council Offices,
Bridge Street,
Peterborough.

SECTION I

STATISTICS AND SOCIAL CONDITIONS

General Statistics

Area of Administrative County (in acres)	53,464
Population (Census, 1951)	63,784
Population (Registrar-General's estimate mid-1953)...	64,020
Rateable Value (1st April, 1954)	£426,649
Estimated Product of a Penny Rate	£1,725

Population by Districts	Census 1951	Estimated mid-1953
City of Peterborough	53,412	53,670
Peterborough Rural District	7,273	7,491
Barnack Rural District	3,099	2,859
Administrative County	63,784	64,020

The estimated population for mid-1952 was 63,690. The Registrar-General estimates an increase of 710 in the City of Peterborough, an increase of 11 in the Peterborough Rural District, and a decrease of 391 in the Barnack Rural District—a total increase of 236 in the County as a whole, compared with mid-1952.

In 1952 the Registrar-General estimated a decrease of 532 in the Barnack Rural District, and in 1953 a further decrease of 391 is estimated. This estimated decrease of nearly one thousand in two years in the population of the Barnack Rural District is puzzling.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1953

Live Births	Males	Females	Total
Legitimate	523	465	988
Illegitimate	28	40	68
Total	551	505	1056

Rate per 1,000 population 16.4

Birth Rate for England and Wales 15.5

Stillbirths

Legitimate	15	11	26
Illegitimate	—	—	—
Total	15	11	26

Rate per 1,000 live births 24.6

Rate per 1,000 population 0.40

Rate per 1,000 population for
England and Wales... .. 0.35

Deaths	Males	Females	Total
... ..	395	317	712

Rate per 1,000 population 11.1

Death Rate for England and Wales... .. 11.4

Infant Mortality						<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	...	...	...	...	...	16	10	26
Illegitimate	...	...	...	...	...	2	—	2
Total	...	...	...	...	...	18	10	28

Rate per 1,000 live births :—

Legitimate	...	...	...	...	...	26.3
Illegitimate	...	...	...	...	...	29.4
Total	...	...	...	...	...	26.5

Deaths from Measles (all ages)...	...	...	...	...	0
Deaths from Whooping Cough (all ages)	...	...	...	...	0
Deaths from infective and other parasitic diseases (under 2 years)	...	...	...	...	0

Chief Causes of Death — 1953

Cancer	...	...	...	...	...	121
Vascular lesions of nervous system	...	...	...	...	...	118
Coronary disease, angina	...	...	...	...	...	76
Other heart disease	...	...	...	...	...	98
Other Circulatory diseases	...	...	...	...	...	21
Bronchitis...	...	...	...	...	...	45
Pneumonia	...	...	...	...	...	26
Accidents	...	...	...	...	...	35

The deaths in age periods are as follows (Registrar-General's figures):—

0—1 years	...	...	...	...	...	28
1—5	„	...	...	...	...	3
5—15	„	...	...	...	...	7
15—25	„	...	...	...	...	5
25—45	„	...	...	...	...	46
45—65	„	...	...	...	...	157
65—75	„	...	...	...	...	181
75	„	and over	...	...	...	285

Births

The total number of live births in the County in 1953 was 1,056, compared with 978 in 1952, 993 in 1951, 972 in 1950, and 1,014 in 1949. The birth rate is 16.4 compared with 15.5 for England and Wales as a whole and the highest since 1948, when it was 17.2.

551 of the 1,056 children born in 1953 were males and 505 females. 988 were legitimate and 68 illegitimate, compared with 52 illegitimate births in 1952. The illegitimacy rate was 6.8 per 100 live births, compared with 5.3 in 1952.

The number of live births and the rates in each area of the County were:—

<i>Area</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>	<i>Rate</i>
Peterborough City	458	416	874	16.2
Peterborough Rural District	61	63	124	16.5
Barnack Rural District	32	26	58	20.2
Administrative County	551	505	1,056	16.4

The live birth rate for England and Wales was 15.5; for the 160 County Boroughs and Great Towns 17.0; for the 160 smaller towns 15.7; and for London 17.5.

Our rate (16.4) is, therefore, slightly higher than that of the country as a whole.

The birth rates in each year in the Soke of Peterborough since 1930 are as follows :—

1930—15.8	1938—15.2	1946—19.5
1931—15.1	1939—14.1	1947—19.8
1932—14.1	1940—14.2	1948—17.2
1933—13.1	1941—14.1	1949—15.8
1934—13.8	1942—15.6	1950—14.9
1935—14.1	1943—16.5	1951—15.4
1936—15.1	1944—20.2	1952—15.3
1937—14.3	1945—17.8	1953—16.4

It will be noted that the birth rate in 1953 was the highest since 1948.

Stillbirths

The number of stillbirths in 1953 was 26 (21 in the City, 4 in the Peterborough Rural District, and 1 in the Barnack Rural District). The stillbirth rate is, therefore, 0.40 per 1,000 of the population.

The stillbirth rate for England and Wales in 1953 per 1,000 of the population was 0.35; for the 160 County Boroughs and Great Towns 0.43; for the 160 smaller towns 0.34; and for London 0.38. Our rate is therefore higher than that of the country as a whole.

15 of the 26 stillbirths occurred in Hospitals or maternity units attached to hospitals, and 11 occurred in domiciliary midwifery practice.

Infant Mortality

The Registrar-General records 28 deaths among infants aged under one year in the County of the Soke of Peterborough in 1953, 23 being assigned to the City of Peterborough, 4 to the Peterborough Rural District, and one to the Barnack Rural District.

Of the 28 deaths, 18 occurred in males and 10 in females. Two of the infants who died were illegitimate.

The numbers and rates in each district of the Administrative County per 1,000 births were as follows :—

City of Peterborough ...	...	...	...	...	23	Rate	26.3
Peterborough Rural District	...	...	...	...	4	„	31.4
Barnack Rural District	...	...	...	...	1	„	17.2
Administrative County	...	...	...	...	28	„	26.5

In England and Wales as a whole the infant mortality rate was 26.8; in the 160 County Boroughs and Great Towns 30.8; in the 160 smaller towns 24.3; and in London 24.8. Our rate, therefore is almost the same as that of the country as a whole, and is 6.1 higher than in 1952, when the infant mortality rate (20.4) was the lowest ever recorded.

I append a Table showing the live birth rates and infant mortality rates in England and Wales for the years 1942-53, and for comparison, similar rates for the Soke of Peterborough.

Year	England and Wales		Soke of Peterborough	
	<i>Live Births per 1,000 population</i>	<i>Infant Mortality Rate</i>	<i>Live Births</i>	<i>Infant Mortality</i>
1942	15.6	51	15.6	36
1943	16.2	49	16.5	44
1944	17.5	45	20.2	42
1945	16.1	46	17.8	41
1946	19.2	43	19.5	33
1947	20.6	41	19.8	30
1948	17.9	34	17.2	38
1949	16.7	32	15.8	26
1950	15.8	29	14.9	20
1951	15.5	29	15.4	29
1952	15.3	27	15.3	20
1953	15.5	26	16.4	26

Although the Registrar-General attributes 28 deaths in infants under one year of age, from my death returns I can trace records of 26 only, *viz.*, 21 in the City of Peterborough, 4 in the Peterborough Rural District, and one in the Barnack Rural District. Incidentally last year I had records of 22 infant deaths, whereas the Registrar-General attributed 20 deaths only in infants under one year of age.

As many as 23 of the 26 infant deaths of which I have records occurred in babies under four weeks of age. One died aged 5 minutes; two aged 15 minutes; one at 1 hour; two at 4 hours; three at 1 day; four aged 2 days; three aged 4 days; one aged 5 days; two at 1 week; one at 2 weeks; and three at 3 weeks of age.

Two of the remaining three were aged 3 months, and one 5 months.

The causes of death of the 26 infants (as recorded on the death certificates) were as follows :—

Prematurity	...	...	...	...	...	...	7
Broncho-Pneumonia	...	...	...	...	...	...	3
Cerebral Haemorrhage	...	...	...	...	...	...	3
Acute Meningitis	...	...	...	...	...	...	2
Congenital Heart Disease	...	...	...	...	...	...	2
Asphyxia	...	...	...	...	...	...	1
Misadventure	...	...	...	...	...	...	1
Bilateral Congenital Atelectasis	...	...	...	...	...	...	1
Hydropsfoetalis	...	...	...	...	...	...	1
Anencephaly	...	...	...	...	...	...	1
Spina Bifida	...	...	...	...	...	...	1
Intestinal Obstruction	...	...	...	...	...	...	1
Bilateral Suprarenal Haemorrhage	...	...	...	...	...	...	1
Toxic Purpura	...	...	...	...	...	...	1
Oesophageal Atresia	...	...	...	...	...	...	1

Twenty-five of the infants died in hospitals, or maternity units attached to hospitals, and one died at home.

Deaths

There were 712 deaths in the County in the year 1953 (395 males and 317 females), giving a death rate of 11.1 per 1,000 of the population, compared with a rate of 10.8 in 1952; 11.6 in 1951, and 11.7 in 1950.

467 of the deaths occurred in persons of 65 years or over, or 65 per cent of the total deaths. 286 deaths occurred in persons over the age of 75 years.

The death rate for England and Wales in 1953 was 11.4 (11.3 in 1952); for the 160 County Boroughs and Great Towns 12.2 (12.1 in 1952); for the 160 smaller towns 11.3 (11.2 in 1952) and for London 12.5 (12.6 in 1952).

The following Table shows the death rates in the Soke of Peterborough since 1920 :—

1920—12.6	1931—11.9	1942—11.4
1921—11.0	1932—12.1	1943—12.7
1922—11.0	1933—13.4	1944—11.3
1923—10.4	1934—12.8	1945—11.6
1924—11.3	1935—10.9	1946—11.8
1925—10.9	1936—11.3	1947—12.1
1926—13.0	1937—12.0	1948—10.6
1927—13.0	1938—11.1	1949—11.2
1928—11.7	1939—12.4	1950—11.7
1929—11.2	1940—13.0	1951—11.6
1930—11.2	1941—11.3	1952—10.8
		1953—11.1

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE

<i>Causes of Death</i>	<i>All ages</i>	<i>Under 1 year</i>	1-5	5-15	15-25	25-45	45-65	65-75	75 & over
Tuberculosis ;									
respiratory ...	4					1	2	1	
Tuberculosis ; other ...	1		1						
Syphilitic disease ...	1						1		
Diphtheria ...									
Whooping cough ...									
Meningococcal									
infections ...									
Acute poliomyelitis ...	1			1					
Measles ...									
Other infective and									
parasitic diseases ...	4					1	2	1	
Malignant neoplasm									
stomach ...	19						6	6	7
Malignant neoplasm									
lung, bronchus ...	14					1	10	3	
Malignant neoplasm									
breast... ...	10					1	6	1	2
Malignant neoplasm									
uterus ...	8						4	2	2
Other malignant and									
lymphatic neoplasm	70			1		5	22	19	23
Leukaemia, aleukaemia	4					2	2		
Diabetes ...	6		1				1		4
Vascular lesions of									
nervous systems ...	118					2	13	39	64
Coronary disease, angina	76					4	22	22	28
Hypertension with heart									
disease ...	9					1	2	2	4
Other heart disease ...	98					2	14	23	59
Other circulatory									
disease ...	21						3	5	13
Influenza ...	9			1		1	1	3	3
Pneumonia ...	26	3	1			2	5	5	10
Bronchitis ...	45			1		1	5	20	18
Other diseases of									
respiratory system ...	8	1				2	4		1
Ulcer of stomach,									
duodenum ...	6					1	3	2	
Gastritis, enteritis and									
Diarrhoea ...	4					1	3		
Nephritis and nephrosis	7					1	2	2	1
Hyperplasia of prostate	15							7	8
Pregnancy, child-birth,									
abortion ...	1				1				
Congenital									
malformations ...	10	8				1			1
Other defined and ill-									
defined diseases ...	68	15	1		1	4	10	11	26
Motor vehicle accidents	11			2	1	3	3	1	1
All other accidents ...	24	1			1	4	4	5	9
Suicide ...	12					4	7		1
Homicide and									
operations of war ...	2					1		1	
TOTALS ...	712	28	4	6	5	46	157	181	285

Cancer Deaths

There were 121 deaths from cancer in the Soke of Peterborough during the year 1953 (67 males and 54 females), giving a death rate of 1.8 per 1,000 of the population, compared with a rate of 1.9 in 1952, and 1.4 in 1951.

The number of deaths from cancer in each year since 1930 is as follows:—

1930—81	1938—95	1946—121
1931—92	1939—86	1947—125
1932—79	1940—93	1948—115
1933—110	1941—96	1949—104
1934—90	1942—113	1950—121
1935—72	1943—122	1951—98
1936—79	1944—92	1952—122
1937—83	1945—96	1953—121

Fourteen of the 121 cancer deaths were due to malignant disease of the lung or bronchus, 11 of these being males and 3 females.

In view of the publicity in the medical and lay press with regard to the increase in the number of deaths from lung cancer, it may be interesting to note the figures for the Soke of Peterborough during two four-year periods, which are as follows :—

	1940	—	6 deaths
	1941	—	4 „
	1942	—	12 „
	1943	—	12 „
			—
Total			34 „
			—
	1950	—	15 deaths
	1951	—	11 „
	1952	—	16 „
	1953	—	14 „
			—
Total			56 „
			—

It will be observed that there has been an increase in deaths from malignant disease of the lung and bronchus in this County of 60 per cent in the years 1950–53, compared with 1940–43.

There were 10 deaths from carcinoma of the breast compared with 11 in 1952 and 5 in 1951, and 19 deaths from malignant disease of the stomach compared with 25 in 1952 and 19 in 1951.

General Remarks

There are one or two brief observations I should like to make with regard to the deaths in the Soke of Peterborough in 1953.

The most striking thing is the small number of deaths due to respiratory tuberculosis. According to the Registrar-General four people, only, died from this disease in the County in 1953, which is an all-time record and gives the remarkably low death rate of 0.06 per 1,000 of the population, compared with 0.20 for England and Wales as a whole.

This year there is only one death attributed to syphilitic disease, compared with 7 in 1952.

As many as 35 deaths are attributed to accidental causes, 11, or nearly one-third, being due to motor accidents.

There is an increase of 100 per cent in the deaths from suicide (12, compared with 6 in 1952). These were all of persons living in the City of Peterborough, 7 being males and 5 females. Four were persons aged between 25 and 45 years.

The Registrar-General attributes one death to pregnancy and childbirth but from my records I cannot trace such a death occurring in a resident of the Soke of Peterborough, although a young woman of 21, whose home address was in the Isle of Ely died at a Maternity Hospital in Peterborough from acute streptococcal pneumonia and post-partum haemorrhage due to retained placenta.

One death is recorded from acute poliomyelitis, and 9 from influenza.

Twenty deaths occurred in persons of 90 years of age or over, two being aged 98 years. 15 were females and 5 males.

There were 10 deaths only in young persons aged between 1 and 15 years.

No deaths from whooping cough, diphtheria, or measles are recorded and four only from other infective and parasitic diseases.

SECTION II

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

Administration

The County Council, as a Local Health Authority, established a County Health Committee in accordance with the requirements of the National Health Service Act, 1946. The County Health Committee has, in turn, established the following Sub-Committees :—

- (a) Care of Aged Sub-Committee (dealing with all matters under the National Assistance Act, 1948).
- (b) Ambulance Sub-Committee.
- (c) Mental Health Sub-Committee.
- (d) Maternity and Domiciliary Services Sub-Committee.
- (e) Prevention of Illness and After-Care Sub-Committee.

The majority of the members of each of the Sub-Committees are members of the Local Health Authority, but there are also co-opted persons who have a special interest in the subjects dealt with by the individual Committees. Each Committee meets once monthly.

A special survey of the working of the services over the four years 1949–1952 was included in my Report for last year.

No noteworthy changes took place in 1953, and comments and statistics covering the various sections are given below :—

SECTION 22 — Care of Mothers and Young Children

Ante-Natal Clinics

Ante-natal clinics are held at “The Gables” Maternity Hospital, Peterborough for patients who have booked for admission to the Maternity Units of the Regional Hospital Board. Blood testing is carried out as a matter of routine.

A considerable number of women are attended ante-natally by their own doctors. Therefore, no doctors’ ante-natal clinics are held under the auspices of the Local Health Authority.

A Midwives ante-natal clinic is, however, held at the Child Welfare Centre at the Town Hall, Peterborough, on three afternoons and one morning a week, for patients who have booked a domiciliary midwife for their confinement. Blood testing is not carried out, but the majority of general practitioners now make the usual tests.

During the year 1953, 366 women attended these clinics (322 being new cases) and the total attendances were 1,277, compared with 832 attendances made by 316 women in 1952.

Mothercraft classes are held weekly at the Child Welfare Centre, Town Hall, and are increasing in popularity. Invitations to attend these classes are sent by post from my Office to all known expectant mothers, including those who have booked for admission to the Maternity Units (a weekly list of such bookings being supplied to me).

During the year 1953, 118 mothers attended the Mothercraft Classes, compared with 62 in 1952.

Maternity outfits are supplied, free of charge, to all mothers who book a domiciliary midwife for their confinement.

Child Welfare Centres

There were 12 child welfare centres maintained by the Local Health Authority at the end of the year. These were situated as follows :—

(1) Town Hall, Peterborough	Tuesday mornings and afternoons. Wednesday afternoons.
(2) Mountsteven Avenue, Walton, Peterborough	Monday and Thursday afternoons.
(3) Dogsthorpe/Newark School, Peterborough	Monday and Thursday afternoons.
(4) Barnack	First Wednesday and third Thursday after- noons each month.
(5) Castor	Second and fourth Tuesday afternoons each month.
(6) Eye	First and third Tuesday afternoons each month.
(7) Glinton	First Thursday and third Wednesday after- noons each month.
(8) Helpston	Fourth Wednesday afternoon each month
(9) Marholm	Second Thursday afternoon each month
(10) Maxey	Fourth Thursday afternoon each month
(11) Newborough	Second and fourth Tuesday afternoons each month.
(12) Wittering	First and third Tuesday afternoons each month.

There are no voluntary Child Welfare Centres in the County, although voluntary workers assist at the Local Authority's Clinics, and their services are much appreciated.

Either the County Medical Officer or the Deputy County Medical Officer attends the welfare centres at regular intervals, *e.g.*, the town clinic at least once weekly, and the country clinics monthly or bi-monthly.

I append a statistical record of the work performed at the child welfare clinics during the year 1953.

Number of Centres provided at the end of the year	...	...	...	12
Number of Child Welfare Sessions held per month	...	...	...	48
Number of children who first attended during the year, and who at their first attendance were under 1 year of age	...	...	...	620
Number of children who attended during the year and who were born in : 1953	...	...	...	57
1952	...	...	...	44
1951-48	...	...	...	338
Total Number of children who attended during the year	...	...	...	1,359
Number of attendances during the year made by children who at the date of attendance were :				
(a) Under 1 year	...	...	...	8,932
(b) One, but under two years	...	...	...	1,999
(c) Two, but under five	...	...	...	770
Total attendances during the year	...	...	...	11,701

During the year a Mothers' Club was formed for the mothers of infants attending the Child Welfare Centres in the City of Peterborough. The Club meets (at the Welfare Centre premises, Town Hall,) on the first Wednesday of each month for talks on health subjects, social activities, etc., and is much appreciated by the mothers who attend, the average attendance at each meeting being approximately 30, growing each month.

Premature Births

Babies weighing $5\frac{1}{2}$ lbs. or less at birth, irrespective of the period of gestation, are classified as premature, and arrangements are made for this information to be supplied by doctors and midwives when notifying the birth of a child.

A specially equipped premature baby cot is provided by the Local Health Authority. It is held at "The Gables," and is taken from there to any address where it may be required.

46 premature live births were notified during the year. 9 of these births occurred at home and 37 in hospital. In addition, 8 premature still-births were notified, 3 occurring at home and 5 in hospital.

Four of the premature babies born in hospital died within 24 hours of birth, their weights at birth being :—

Under 3 lb. 4 ozs., or less	...	...	...	...	...	...	...	2
Over 3 lb. 4 ozs., up and including 4 lb. 6 ozs.	...	...	...	...	...	...	...	1
Over 4 lb. 6 ozs., up to and including 4 lb. 15 ozs.	...	...	...	...	...	...	...	1

Day Nursery

One Day Nursery (situated in Granville Street, Peterborough) is maintained by the Local Health Authority.

The number of approved places is :

Children aged 0-2 years...	...	...	...	...	...	...	15
Children aged 2-5 years...	...	...	...	...	...	...	30
Total	...	...	...	...	...	...	45

The number of children on the Register at the end of the year was :—

Children aged 0-2 years...	...	...	...	...	...	12
Children aged 2-5 years...	...	...	...	...	...	25
Total	...	...	...	...	...	37

The average daily attendance during the year was :—

Children aged 0-2 years...	...	...	...	...	...	12
Children aged 2-5 years...	...	...	...	...	...	21
Total	...	...	...	...	...	33

Unmarried Mothers and Care of Illegitimate Children

Arrangements for the care of unmarried mothers are made in liaison with Miss A. M. Fyfe, M.A., the Moral Welfare Worker (appointed and paid by the Peterborough Women and Girls' Help Society).

Applications were made during 1953, for the admission of five unmarried mothers to Maternity Homes at the expense of the Local Health Authority, and admission was arranged to the following Homes :—

Church Army Hostel, Tulse Hill, London	...	...	...	...	1
Church Army Hostel, Devonshire Terrace, London...	...	...	...	...	1
The Haven, Yateley, Nr. Camberley	...	...	...	...	1
St. Bridget's Hostel, Liverpool	.....	...	...	...	1

The fifth case was admitted to a Maternity Home in London, but stayed for one day only, and then returned to Peterborough, and was subsequently admitted to the " Gables " for her confinement.

Special visits are made by the Health Visitors to all unmarried mothers and their children. The Children's Officer and Miss Fyfe assist, where necessary, in securing adoption of illegitimate children into suitable homes although it is the policy first to endeavour to find foster parents, or to admit the children to the Day Nursery in cases where the mothers have to go out to work.

Dental Care

The Local Health Authority is not responsible for the School Medical Service, and therefore employs no Dental Officer.

A full-time Dental Officer is, however, employed by the Peterborough Joint Education Board, which is an independent Authority. Unofficially, and on a purely personal basis, the School Dental Surgeon does treat a number of pre-school children at the School Dental Clinic, and during the year, 1953, fifty-three such children were treated. I do appreciate this kind co-operation of Mr. T. H. Roberts, L.D.S.

SECTION 23 — Midwives Service

The number of midwives who notified their intention to practice in the County in 1953 was 26. Of these, 20 were working in institutions, and 6 were engaged in domiciliary practice.

Six full-time domiciliary midwives are employed by the Local Health Authority. They each have a car, and therefore are able to cover the whole County adequately.

The number of Deliveries attended by Midwives during 1953, showing number of cases in which a Doctor was present :—

DOMICILIARY CASES							
<i>Doctor not booked</i>				<i>Doctor booked</i>			
<i>Doctor present at delivery</i>				<i>Doctor present at delivery</i>			<i>Cases in Institution</i>
<i>Doctor not present</i>				<i>Doctor not present</i>			
				<i>Total</i>			
Midwives employed by County Council ...	—	267		75	53	395	
Midwives employed by Hospital Management Committees ...	—						911
Midwives in Private Practice (including Nursing Homes) ...							45
Totals ...	—	267		75	53	395	956

It will be noted that the County Council midwives attended a total of 395 cases in 1953, compared with a total of 319 in 1952 and 257 in 1951.

Analgesia

All the midwives employed by the County Council are qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board. An apparatus was available for use by every midwife and analgesia was administered during labour to 339 women (domiciliary confinements). Pethedine is also administered by the midwives in domiciliary practice—199 such administrations being made in 1953.

The County Medical Officer is responsible for the medical supervision of the midwives, and the Superintendent Nursing Officer is responsible for administration.

SECTION 24 — Health Visiting

The Local Health Authority's establishment allows for six full-time Health Visitors (including one employed wholly as a Tuberculosis Health Visitor), and during the year the approved establishment was fully made up.

The following is a summary of visits paid by the Health Visitors during the year 1953 :—

(a) Home Visits					<i>First visits</i>	<i>Total visits</i>
Number of children under 5 years of age visited during the year						4,970
Expectant Mothers					469	665
Children under 1 year of age					1,058	3,054
Children aged 1 and under 2 years						1,544
Children aged 2 but under 5 years						3,771
Tuberculosis Households						36
Total visits paid to tuberculosis households by Tuberculosis Health Visitor						2,560
Other Cases (special visits)						967
Total number of families or households visited by Health Visitors						7,471
(b) Clinics						
Total number of attendances made by Health Visitors at local Health Authority Clinic sessions per month						44
Total number of attendances by whole-time tuberculosis visitors at Chest Clinic sessions per month						25

Four of the Health Visitors (including the Tuberculosis Health Visitor) have cars and are classed as "essential users."

In addition to attendance at welfare clinics and visiting expectant and nursing mothers and young children, the Health Visitors (usually the Superintendent Nursing Officer) investigate the home conditions of women whose confinement in hospital is recommended on social grounds, persons who apply for admission to Part III accommodation, patients discharged from hospital, certain senile and chronic sick persons, etc.

SECTION 25 — Home Nursing

In the City of Peterborough home nursing is undertaken by the Florence Saunders Nursing Association, on an agency basis, six whole-time nurses being employed.

In the rural areas of the County three full-time District Nurses are employed by the Local Health Authority. Each nurse is provided with a car so that the whole rural area is adequately covered by these nurses, who reside at Barnack, Castor and Glington.

Patients requiring nursing are usually notified to the District Nurses direct by General Practitioners.

The Hospital Almoner contacts the nurses about all cases needing nursing care on discharge from Hospital.

I append details of the work carried out by the District Nurses during the year 1953 :—

							<i>No. of Cases</i>	<i>No. of Visits</i>
Medical	...	...	...	...	...	...	410	17,220
Surgical	...	...	...	...	...	...	133	4,093
Infectious Disease	...	...	...	...	...	...	1	9
Tuberculosis...	...	...	...	...	...	...	7	96
Maternal Complications	...	...	...	...	...	...	16	227
Others	...	...	...	...	...	...	40	759
Totals	...	...	...	...	...	...	607	22,404

The care and nursing of old people absorbs a large part of the nurses' time and approximately 50 per cent of the above visits were paid to patients over the age of 65 years.

No night service is provided, but evening visits are made by the District Nurses if necessary.

SECTION 26 — Vaccination and Immunisation

In this County, vaccination and diphtheria immunisation are carried out by General Practitioners, the fees for completed record cards being paid by the Local Health Authority.

Every effort is made by persuasion and propaganda to get children vaccinated and immunised, and each year a special propaganda campaign is initiated.

Health Visitors impress upon parents the need for vaccination and diphtheria immunisation ; posters are displayed in the Welfare Centres ; propaganda literature is regularly sent out from the County Health Office and is available for distribution at the Child Welfare Clinics.

So far as diphtheria immunisation is concerned, the General Practitioners co-operate by giving special times when parents can take their infants to the surgeries to avoid waiting, and when notices are sent out from my office to the

parents of infants who have reached the age of eight months, the parents are informed of the special days and times when their own medical practitioner is available to carry out immunisations. If it is found that a child has not been immunised when it reaches the age of one year, a " Birthday Greeting " card is sent, reminding parents of the importance of this.

In addition, the importance of " boosting " injections of diphtheria prophylactic is stressed by both Health Visitors and the School Medical Officers (when children are medically examined on admission to school), and General Practitioners co-operate well with regard to this.

Up to the present this Authority has made no arrangements for immunisation against whooping cough.

The statistics for vaccination and diphtheria immunisation in relation to the year 1953 are appended :—

Number of Children at 31/12/53, who had completed a course of Immunisation at any time before that date (i.e., at any time since 1/1/1939)

Age at 31/12/53	Under 1	1-4	5-9	10-14	Total under 15 years
Last complete course of injections					
A. 1949-1953	20	2,286	1,625	354	4,285
B. 1948 or earlier	—	—	1,716	2,700	4,416
C. Estimated mid-year child population	990	4,010	9,000		14,000
Immunity Index	6%	57%	71%		62.1%

If diphtheria is to be kept at bay it is essential that at least 75% of children under 15 years of age should be effectively immunised. This means that they should have received some protection within the last five years. The percentage of the child population thus protected is referred to as the " immunity index," and it is disappointing to note that the index in this area is below 75%.

Vaccination

Number of Persons Vaccinated (or re-vaccinated) during the Year ended 31/12/53

Age at date of vaccination	Under 1	1	2-4	5-14	15 or over	Total
Number vaccinated	256	16	25	19	41	357
Number re-Vaccinated	—	—	—	9	73	82

SECTION 27 — Ambulance Service

The County Council is responsible under the National Health Service Act, 1946, for arranging the conveyance of sick and injured persons who are unfit to travel by ordinary means of transport, where the necessity arises. The area covered by the County Ambulance Service is the whole of the County

of the Soke of Peterborough, and certain adjoining areas, *e.g.*, Old Fletton U.D.; Norman Cross R.D.; Conington Parish (Hunts.) and Crowland District (Holland).

The service is equipped with the following vehicles :—

Ambulances

- 1 Daimler 27 h.p. Ambulance.
- 1 Chevrolet (1941) 30 h.p.
- 2 Austin “Welfarer” Ambulances, one of which has been converted into a sitting case ambulance.
- 1 Talbot (1937) 18 h.p. (Maintained by Police Authority, for use by Coroner’s Officer, on loan basis).

Sitting Case Cars

- 2 Austin 16 h.p. Hire Cars.

The above service is augmented as follows :—

Hospital Car Service

Organised by W.V.S.

St. John Ambulance Brigade, Peterborough

One ambulance available for long runs if 24 hours’ notice is given.

St. John Ambulance Brigade, Stamford

Two ambulances available for service in the Barnack Rural District for all stretchers, except infectious and mental patients, and sitting car cases.

British Red Cross, Stamford

One light ambulance and four private cars available for sitting cases in the Barnack Rural District.

The following figures indicate the work of the County Ambulance Service during 1953, and for comparison the figures for 1952 are also given, which show the upward trend in the number of patients carried by the directly provided services :—

Patients Carried and Mileages 1/1/53 to 31/12/53

				<i>Total Patients Carried</i>		<i>Total Miles</i>	
				1952	1953	1952	1953
Directly Provided Service							
Ambulances	...	...	...	4,116	4,400	40,499	45,560
Sitting Case Cars	...	...	...	6,262	7,683	68,095	74,610
Agency Services							
St. John Ambulance (Stamford)	...	...	...	63	58	705	750
British Red Cross (Kesteven)	...	...	...	167	192	3,903	4,180
Supplementary Services							
St. John Ambulance (Peterborough)	...	...	...	1	4	76	420
Hospital Car Service	...	...	...	527	597	32,688	38,430
Totals	...	...	...	...	11,136	12,934	145,966
							163,960

SECTION 28 — Prevention of Illness, Care and After-Care

Tuberculosis

The Authority's responsibility is in relation to prevention, care and after-care, treatment being provided by the Regional Hospital Board.

One full-time Tuberculosis Health Visitor is employed by the Local Health Authority. She works in close co-operation with the Chest Physicians of the Regional Hospital Board, and in addition to assisting them at the Chest Clinics she carries out home nursing of tuberculosis patients, visits all contacts to investigate home conditions, and to persuade them to come to the Chest Clinic for examination, carries out "patch" testing of children, etc.

A report on the environmental condition of each case of tuberculosis notified is submitted by the After-Care Tuberculosis Nurse to the County Medical Officer, who take steps to see that all contacts are traced and, if possible, called up for examination by the Chest Physician.

Beds, bedding, open-air shelters and nursing requisites are available for patients being nursed at home. These patients also receive domestic help if required, and 10 such patients were assisted during the year.

In addition, arrangements exist with Settlements for the reception of suitable patients. When these patients are able to work at least five hours a day the County Council accept financial responsibility for their maintenance.

During the year 1953, there were two patients at Papworth Village Settlement and one at Preston Hall.

Other Types of Illness

For the care and after-care of the non-tuberculous sick, the Authority provide nursing equipment and apparatus required by patients being nursed at home, such as wheel chairs, bed rests, bed pans, urinals, mackintosh sheeting, etc.

As with the tuberculous, domestic help is available, and 155 chronic sick persons received domestic help during the year.

Health Education

Health education plays an important part in the prevention of illness. Pamphlets on health matters, and copies of the journal "Better Health" are distributed free of charge at the welfare clinics.

The County Medical Officer and other members of the County Public Health Staff frequently give talks and lectures to social, religious and other organisations on various aspects of health, hygiene, and accidents in the home.

SECTION 29 — Domestic Help Service

Home Helps are provided for households where assistance is needed because of illness, confinement, old age, etc. The amount of help given varies according to the needs of the individual assisted.

At the end of the year 1953, twenty-three part-time and five whole-time Domestic Helps were employed. They are under the supervision and direction of a part-time Home Help Organiser working, officially, 24 hours a week.

The demand for domestic home help is increasing, and in 1953, 298 cases were assisted, compared with 211 in 1952, 240 in 1951, 204 in 1950, and 123 in 1949.

The 298 cases comprised :—

(a) Maternity (including expectant mothers)	...	...	...	72
(b) Tuberculosis...	...	...	...	1
(c) Chronic sick including aged and infirm	...	...	...	155
(d) Others	...	...	...	61
Total	...	...	...	298

SECTION 51 — Mental Health Service

1. ADMINISTRATION

(a) Constitution and Meetings of Mental Health Sub-Committee.

The Mental Health Sub-Committee of the County Health Committee deal with the functions connected with the care and welfare of mental patients and mental defectives, and consists of eight members of the County Council and three co-opted members, one of whom is a retired Medical Practitioner of many years' experience. This Sub-Committee meets on the third Tuesday of each month.

(b) Staff

The County Medical Officer of Health is Medical Adviser to the Committee and there is one Duly Authorised Officer, one Deputy Duly Authorised Officer (who is also Chief Clerk in the Public Health Department) and one Occupation Centre Supervisor, who is a certificated teacher.

(c) Co-ordination with Regional Hospital Boards, etc.

The co-ordination with Regional Hospital Boards continues to be quite good, although the position with reference to accommodation in Mental Defective Institutions does not improve and delay is still being experienced in relation to this type of patient.

The Consultant Psychiatrists for the area have been of great assistance in helping to cope with the difficult cases arising from time to time and the closest co-operation is established between the officers of the Regional Hospital Boards and the Local Health Authority.

(d) Delegation of Duties

No duties under the Mental Health Service are delegated to Voluntary Associations.

2. ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY

(a) Prevention, Care and After-Care

Among the measures taken to prevent mental illness, a psychiatric clinic has been established at the local general hospital on one day per week (Wednesdays) and is staffed by Consultant Psychiatrists from Rauceby Mental Hospital.

The General Practitioners in the area are aware of this facility and any Practitioner having a patient suffering from mental illness can arrange an appointment for such patient to be seen at the Clinic.

This Clinic has again proved its great value and in consequence many cases have been admitted into mental hospitals as "Voluntary Patients," thus reducing the number of "Certified" patients. It has also created a more enlightened attitude toward mental hospitals and mental illness.

In relation to care and after-care of the mentally ill and mental defectives, the Duly Authorised Officer visits the homes, at regular intervals, of all persons who are on licence from Mental Hospitals and Mental Defective Institutions, who are residing within the area of the Local Health Authority.

Upon the discharge of a patient from the Mental Hospital, the Medical Superintendent furnishes the patients' General Practitioners with reports on their progress in hospital, together with recommendations as to future treatment, if necessary, and a copy of such report is furnished to the County Health Department.

The Psychiatric Social Worker, attached to the Mental Hospital, and the Duly Authorised Officer, have regular discussions regarding the after-care of patients.

b) Lunacy and Mental Treatment Acts

The Duly Authorised Officer deals with all matters arising under these Acts, arranging admissions to hospital of patients and where necessary, providing the transport thereto.

It has been the general policy to assist Medical Practitioners and the general public in every aspect of the mental health service and in this way a happy relationship has been built up, ensuring a close liaison and full co-operation from all concerned.

Whenever necessary, the Duly Authorised Officer assists persons discharged from mental hospitals or mental defective institutions to obtain suitable employment. This is usually done through the medium of the Ministry of Labour and National Service, with whom there is the closest co-operation and understanding.

The number of patients in Mental Hospitals under the Lunacy and Mental Treatment Acts on December 31st, 1953, was as follows :—

<i>Name of Hospital</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Gracebridge Heath Hospital	2	15	17
Cambridge (Fulbourn Hospital)	—	1	1
Derby Borough (Kingsway Hospital)	2	—	2
Leicester City (The Towers Hospital)	3	5	8
Leicester County (Carlton Hayes Hospital)	1	2	3
Leavesden	1	—	1
Nottingham City (Mapperley Hospital)	1	1	2
Thraceby Hospital	81	71	152
Worthes Hall, Nr. Huddersfield	—	1	1
Wilton Mental Hospital, Chester	—	1	1
Central Mental Hospital, Nr. Warwick	1	—	1
	92	97	189

During the year 1953, the total number of admissions to Mental Hospitals was 140, this number including 8 patients who were admitted on two occasions during the year. Of this number 111 (or 79.2%) were admitted as Voluntary Patients.

(c) Mental Deficiency Acts, 1913–1938

For the purpose of ascertainment of mental defectives within the area arrangements are in hand whereby all other departments of the County Council dealing with pre-school children, refer all retarded children over two years of age to the County Medical Officer for investigation. The County Medical Officer is also the Principal School Medical Officer and thus all school children are brought to his notice, and where necessary referred to the Local Health Authority.

The supervision of Mental Defectives is carried out by the Duly Authorised Officer, who visits all defectives on licence, under Guardianship and Statutory Supervision, at least once a quarter, and in addition, at the request of Hospital Management Committees and other Local Health Authorities, visits and reports on the home circumstances of patients in connection with the statutory reconsideration of Orders, applications for leave of absence or licence.

The County Medical Officer is kept in touch with all these cases residing within the area, and where necessary, visits and examines the patients in their homes, in addition to the statutory routine visits of inspection.

In addition to the Statutory obligations placed upon the Local Health Authority to see that the patient is well cared for and under suitable control, help and advice is given in obtaining suitable employment, medical treatment and general advice on most other matters which beset these people.

Training of Mental Defectives

The Council has one Occupation Centre, situate at the Town Hall, Peterborough, and classes are held there each Wednesday and Friday afternoon under the direction of the Centre Supervisor, who is a certificated teacher. A number of defectives who are capable of receiving instruction attend the classes, and much benefit is being derived from this instruction.

On December 31st, 1953, the following mental defectives were in Institutions on Licence, under Guardianship, and Statutory Supervision :—

<i>In Institutions</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
St. John's Hospital, Peterborough	18	15	33
Stoke Park Colony, Nr. Bristol	6	5	11
Whittington Hall, Nr. Chesterfield	—	3	3
St. Francis School, Buntingford	2	—	2
Little Plumstead Hospital, Norwich	10	6	16
Riversfield Home, St. Neots	1	1	2
Risbridge Home, Nr. Haverhill	2	—	2
Great Barr Colony, Nr. Birmingham	1	—	1
Bourne Institution, Bourne, Lincs.	—	1	1
Rampton State Institution	1	2	3
	41	33	74

On Licence	...	...	...	...	...	3	5	8
Under Guardianship	...	...	...	...	...	2	—	2
Under Statutory Supervision	...	...	...	...	...	35	38	73
Cases awaiting admission to Institution	...	...	...	...	...	7	3	10
Cases ascertained during the Year	...	...	...	...	...	2	1	3

In two of the cases ascertained during the year, application has been made to the Regional Hospital Board for vacancies in an Institution for them, and pending this, together with the other case ascertained, were placed under Statutory Supervision.

Short-Term Care Cases

During the year two cases were admitted into Institutions in accordance with Circular 5/52 issued by the Minister of Health for short-term care owing to the illness of their parents.

Ambulance Service

The Ambulance Service is available for the conveyance of patients to Mental Hospitals and Mental Defective Institutions and no difficulty has been experienced in this connection.

By arrangement with the Hospital Management Committee, trained nurses are available, from the local General Hospital, to accompany patients whenever necessary.

HANDICAPPED PERSONS

Epileptics and Spastics

The Ministry of Health has requested that the Report of Medical Officers should contain a short statement giving such information as is available on the incidence of epilepsy and cerebral palsy in the area.

As no comprehensive Welfare Scheme for handicapped persons has yet been approved in this area there is little information available about the incidence of these conditions in **adults**.

One or two cases of epilepsy in adults have been brought to my notice recently, and in one case application was made for the admission of a male patient to Chalfont Colony, but owing to his violent behaviour when in an epileptic attack he was not considered to be a case suitable for admission. At the moment this is the only "problem" case of which I am aware.

No cases of severe epilepsy among school children are known to me in my capacity as School Medical Officer, although a small number of children suffer from minor epileptic attacks and are kept under observation; all attend school.

The same position pertains in regard to spastics. Among school children and pre-school children I know of 13 cases of cerebral palsy. Four of these cases are attending school, one is receiving education in a special school, two are being taught privately, and one is having home tuition arranged by the Local Education Authority.

The incidence of cerebral palsy among adults is unknown in view of the absence of a full welfare scheme for handicapped persons.

A branch of the National Spastics Society has recently been formed in Peterborough, and regular meetings are held. Practically all the members of the branch are the parents of spastic children, whose names are known to me. I am a Patron of the Branch and have spoken at one of the monthly meetings recently.

Blind Persons

The welfare of the blind in the Soke of Peterborough is undertaken by the Peterborough Association for the Blind, acting as agents of the County Council.

The Executive Committee consists of 16 members, 9 of whom are appointed by the County Health Committee and 7 by the Peterborough Blind Association.

The Ophthalmic Surgeon to the Peterborough Blind Association is Dr J. H. Gann, M.R.C.S., and the Secretary and Blind Teacher is Miss M. H. White, S.R.N.

The number of registered blind persons in the County at 31st December 1953, was 138, their sexes and ages being as follows :—

<i>Age Group</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
5 — 10	1	1	2
11 — 15	2	1	3
16 — 20	1	—	1
21 — 30	1	2	3
31 — 39...	4	2	6
40 — 49	3	—	3
50 — 59	8	3	11
60 — 64	7	4	11
65 — 69	7	9	16
70 plus	37	45	82
Totals	71	67	138

During the year under review 34 new cases were registered.

There were 24 cases on the Register of the Partially Sighted, 8 men and 16 women. These cases are under constant observation and are seen at intervals by the Ophthalmic Surgeon. 13 new patients were added to the Partially Sighted Register during the year.

The following Table gives particulars of the 34 blind and 13 partially sighted (P/S) cases verified on Form B.D. 8 in the County during 1953. The Table is in the form suggested by the Ministry of Health :—

	<i>Cause of Disability</i>							
	<i>Cataract</i>		<i>Glaucoma</i>		<i>Retrolental Fibroplasia</i>		<i>Others</i>	
	<i>Blind</i>	<i>P/S</i>	<i>Blind</i>	<i>P/S</i>	<i>Blind</i>	<i>P/S</i>	<i>Blind</i>	<i>P/S</i>
No. of cases registered during the year	17	1	2	1	1	—	14	11
No. of cases where treatment was recommended ...	8	—	—	—	—	—	—	3
No. of cases which on follow-up received treatment	2	—	—	—	—	—	—	1

No cases of Ophthalmic Neonatorum were notified during the year.

1,828 visits were paid by the Home Teacher to the Blind during the year, compared with 1,824 in the previous year. Handicrafts and reading of raised type was taught.

There were 18 registered blind persons in St. John's Close, one woman in St. George's Hospital, Stamford, and two others in other residential homes.

Welfare Work

The Social Club has had a very successful year. Meetings are held fortnightly at the St. John Ambulance Hut, loaned to the Club free of charge.

Mr. J. A. Fowler gave two parties, the tea in each case being followed by concert. Teas and entertainments were organised by members of the Central branch of the Women's Co-operative Guild. The Members of the Peterborough branch of the Round Table gave special braille marked wrist watches to four of the blind men following a dinner at the Grand Hotel.

The Harp Orchestra still makes progress and gives much pleasure to both entertainers and entertained alike.

The wireless sets held by blind persons are being kept in good order by the engineers who service them.

SECTION III

PREVALENCE OF, AND CONTROL OVER,
INFECTIOUS AND OTHER DISEASES

Notifiable Diseases

379 cases of infectious disease were notified to the District Medical Officer of Health during 1953, compared with 2,016 in 1952; 868 in 1951, and 1,600 in 1950. There has, therefore, been a considerable reduction in the number of notified cases of infectious disease in 1953, which is chiefly accounted for by the low incidence of measles. In 1952, 1,728 cases of measles were notified compared with 114 only in 1953. There has also been a decrease in the number of cases of scarlet fever and whooping cough.

17 cases of poliomyelitis were notified in 1953 (11 paralytic and 6 non-paralytic) compared with 5 cases in 1952.

The following Table shows the number of cases of each disease notified in the various sanitary districts :—

<i>Disease</i>				<i>Peterboro' M.B.</i>	<i>Peterboro' R.D.</i>	<i>Barnack R.D.</i>	<i>Total</i>
Scarlet Fever	...	...	...	19	3	4	26
Whooping Cough	...	...	...	69	20	17	106
Measles	...	...	...	66	13	35	114
Poliomyelitis :							
Paralytic	...	...	...	4	6	1	11
Non-paralytic	...	...	...	4	2	—	6
Pneumonia	...	...	...	47	2	5	54
Erysipelas	...	...	...	1	—	1	2
Puerperal Pyrexia	...	...	...	54	—	—	54
Food Poisoning	...	...	...	5	—	—	5
Meningococcal Infection	...	...	...	1	—	—	1
Totals	...	...	...	270	46	63	379

Tuberculosis

During 1953 there were 53 new cases of respiratory tuberculosis and 6 non-respiratory tuberculosis notified. In addition one case of respiratory tuberculosis came to notice otherwise than by formal notification, *e.g.*, Death Returns.

The following Table shows the age groups and sexes of the new cases notified in 1953 :—

<i>Age Period</i>	<i>Respiratory</i>		<i>Non-Respiratory</i>		<i>Total</i>	
	M.	F.	M.	F.	M.	F.
0 — 1	1	—	—	—	1	—
1 — 2	—	—	1	—	1	—
2 — 5	1	2	—	—	1	2
5 — 10	—	2	1	2	1	4
10 — 15	3	1	—	1	3	1
15 — 20	3	6	—	—	3	7
20 — 25	5	2	—	—	5	2
25 — 35	4	9	1	—	5	9
35 — 45	2	1	—	—	2	1
45 — 55	3	1	—	—	3	1
55 — 65	3	—	—	—	3	—
65 — 75	2	2	—	—	2	2
Total	27	26	3	3	30	29

The incidence of notifications per 1,000 of the population is 0.92, compared with 1.5 in 1952, 1.02 in 1951, 1.2 in 1950 and 0.65 in 1949.

It will be noted that 10 cases of respiratory tuberculosis occurred in children under the age of 15 years (or nearly one-fifth of the total new cases of pulmonary tuberculosis notified).

Deaths

According to the statistics supplied by the Registrar-General four deaths only were attributed to respiratory tuberculosis in the County in 1953, 2 being males and 2 females. This gives a death rate of 0.06 per 1,000 of the population, compared with a rate of 0.13 in 1952, 0.21 in 1951, 0.15 in 1950, and 0.15 in 1949. The death rate for England and Wales was 0.20 in 1953, so that our rate is less than one-third of that of the country as a whole, and is, in fact, the lowest ever recorded. One death is attributed to non-respiratory tuberculosis.

I append a table in relation to respiratory tuberculosis showing the number of notifications and deaths in the County since 1920, and the incidence of deaths to new notifications :—

<i>Year</i>	<i>New Notifications</i>	<i>Deaths</i>	<i>Percentage of deaths to notifications</i>
1920	81	26	32.1
1921	86	45	52.3
1922	64	32	50.0
1923	93	32	34.4
1924	73	24	32.8
1925	73	30	41.0
1926	57	21	38.6
1927	41	32	78.0
1928	38	26	68.4
1929	62	27	43.5
1930	31	19	61.3
1931	32	23	71.8
1932	35	27	77.1
1933	29	17	58.6
1934	18	24	75.0
1935	28	13	46.4
1936	39	21	53.8
1937	40	31	77.5
1938	29	18	62.0
1939	24	24	100.0
1940	25	8	32.0
1941	31	18	58.0
1942	43	22	51.1
1943	42	21	50.0
1944	43	11	25.8
1945	46	20	43.4
1946	43	23	53.4
1947	58	15	25.8
1948	28	19	67.8
1949	42	10	23.8
1950	73	10	13.7
1951	58	14	24.3
1952	84	9	10.7
1953	53	4	7.5

The average number of deaths per year during the last ten-year period was 13.5, whereas the average during the previous twenty-year period was 44.6.

Residential Accommodation

All admissions to Sanatoria are arranged by the East Anglian Regional Hospital Board, and patients are usually admitted within a few weeks of their names being submitted to the Regional Hospital "Bed-finding" Bureau.

During the year a total of 64 patients from the Soke of Peterborough were admitted to Sanatoria, viz., 31 men, 24 women and 9 children, compared with a total of 76 admitted in 1952.

At the end of the year a total of 57 patients from the Soke of Peterborough were accommodated in the following Institutions :—

<i>Sanatorium</i>	<i>Men</i>	<i>Women</i>	<i>Children</i>
Kelling Sanatorium	16	—	—
Capworth Hall, Cambridge	6	4	—
Mayland Sanatorium, Colchester	—	12	—
Children's Sanatorium, Holt... ..	—	—	7
Manfield Orthopaedic Hospital	1	1	1
Gourne Isolation Hospital	4	1	—
Robert Jones Orthopaedic Hospital	—	1	—
Newmarket General Hospital	1	1	—
Boxhall Hospital, Ipswich	1	—	—
Totals	29	20	8

Five patients were awaiting admission to Sanatoria at the end of the year.

Prevention of Tuberculosis

The Consultant Chest Physician (Dr. G. B. Royce) submits quarterly reports to the County Health Committee on prevention of tuberculosis.

A summary of these reports shows that a total of 1,287 contacts were examined at the Chest Clinic during the year ended 31st December, 1953. Six cases of respiratory tuberculosis were found among the contacts examined.

The Chest Physician states that the arrangements for the prevention of tuberculosis and after-care of patients continues to work satisfactorily. Attendance at the evening contact clinics continues to be high, and thanks to the excellent availability of sanatorium beds, after-care and home nursing are reduced to a minimum, and do not present any major difficulties.

Dr. Royce pays a tribute to the care, determination and persistence, together with tactful handling, which the Tuberculosis Health Visitor (Miss Wagstaff) displays in securing the attendance and examination of contacts at the Chest Clinic.

The Ministry of Labour and various industrial concerns in the City have all given sympathetic consideration to all cases which require restricted or light work, and so far there has been no difficulty in placing these people.

B.C.G. Vaccination

B.C.G. vaccinations are carried out at the Chest Clinic and nearly all parents seem eager and willing to avail themselves of the opportunity of this facility.

During the year 94 B.C.G. vaccinations were carried out.

Public Health (Prevention of Tuberculosis) Regulations

It was not necessary to take any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from respiratory tuberculosis employed in the milk trade), or under Section 172 of the Public Health Act, 1936 (relating to the compulsory removal to hospital of persons suffering from tuberculosis) although in one case a threat to take action under this Section was made.

Venereal Diseases

There is one Venereal Disease Clinic in the area of the Soke of Peterborough, which was formerly situated at 28, Fitzwilliam Street, Peterborough but was transferred to the Out-Patient Department of the Peterborough Memorial Hospital on the 30th November, 1953.

The East Anglian Regional Hospital Board is responsible for the clinic work and administration. The consultant Venereologist in charge of the Centre is Dr. N. A. Ross, and clinics are held as follows :—

Males	Mondays	5.30 — 7 p.m.
	Wednesdays	5.30 — 7 p.m.
Females	Tuesdays	10.30 — 12 noon
	Thursdays	5.30 — 7 p.m.

214 patients attended the Clinic for the first time during the year 1953 compared with 156 in 1952, 174 in 1951, and 235 in 1950.

These were classified as follows :—

						<i>Males</i>	<i>Females</i>	<i>Total</i>
Syphilis	...	...	...	...	...	12	12	24
Gonorrhoea	...	...	...	...	...	37	10	47
Non-gonococcal urethritis	...	...	...	...	...	39	—	39
Other conditions requiring treatment	...	...	...	...	...	28	23	51
Conditions not requiring treatment	...	...	...	...	...	24	24	48
Conditions undiagnosed at 31/12/53	...	...	...	...	...	4	1	5
Totals ...						144	70	214

In addition 7 patients were dealt with for the first time who were transferred from other centres.

On January 1st, 1953, 148 patients were already under treatment, viz., 97 cases of syphilis (38 males and 59 females), 23 cases of gonorrhoea (17 males and 6 females), and 28 cases of other conditions (22 males and 6 females).

12 patients who had defaulted in previous years returned to the Clinic for treatment or observation during the year under review, viz., 1 case of gonorrhoea, and 11 of other conditions. Therefore a total of 526 patients were treated at the Peterborough Clinic during 1953, compared with 319 in 1952, 390 in 1951, 398 in 1950, and 437 in 1949.

There has been an increase in syphilis and gonorrhoea in 1953, compared with 1952, viz., 24 cases of syphilis against 18 last year, and 47 cases of gonorrhoea against 35 in 1952.

During the year 168 patients were discharged after completion of treatment and final tests of cure, or after the diagnosis as non-venereal disease had been confirmed.

11 patients defaulted or died during the year under review.

12 patients were transferred to other Centres or to private practitioners.

On December 31st, 1953, 190 patients were remaining under treatment or observation, viz., 108 cases of syphilis, 32 of gonorrhoea, and 50 cases of other conditions.

The 526 patients who attended the Clinic during the year made 2,673 attendances, as compared with 2,138 attendances in 1952, 2,413 in 1951, 2,245 in 1950, and 2,118 in 1949.

The places of residence of the 221 new patients who attended the Clinic in 1953 were :—

							1953	1952
Soke of Peterborough...	...	...	...	...	...	...	101	62
Huntingdonshire	...	...	...	...	...	...	50	30
Northamptonshire	...	...	...	...	...	...	21	13
Isle of Ely	...	...	...	...	...	...	18	20
Westminster	...	...	...	...	...	...	13	22
Other areas	...	...	...	...	...	...	18	9
Totals	...	...	...	...	...	...	221	156

The following information is given with regard to contact tracing :—

Contacts attending for examination through the agency of :

Patients (1 syphilis, 2 gonorrhoea, 7 others	...	...	...	10
Health Visitor or Social Service Worker (4 syphilis, 1 gonorrhoea, 13 others)	...	...	...	18

One patient from the Soke of Peterborough attended the V.D. Clinic at South Shields during the year and made one attendance.

SECTION IV

INSPECTION AND SUPERVISION OF FOOD

Food and Drugs Act, 1938

I have to thank Mr. J. J. Cole, the County Inspector of Food and Drugs for the following report on the work carried out in the year 1953 :—

**REPORT OF THE COUNTY INSPECTOR OF FOOD
AND DRUGS FOR THE YEAR 1953**

During the year 1953, one hundred and eight samples were taken for chemical analyses and fifteen for bacteriological examination. All with the exception of eight samples of milk and two of sausages were up to standard or otherwise complying with the Ministry of Food Orders or Regulations.

The articles consisted of the following :—

Baking Powder 1; Brawn 1; Coffee 1; Coffee and Chicory 2; Confectionery 3; Cream, Sterilised 2; Cream, Synthetic 1; Curry Powder 1; Ice Cream 1; Evaporated Milk 1; Irish Stew 1; Jam 3; Jam Roll 1; "Kilkof" 1; Meat Paste 4; Meat Pie 2; Milk 42; Minced Peel 1; Mincemeat 1; Pepper 1; Pork Pie 1; Raising Powder 1; Sausages (Pork) 8; Sausages (Beef) 1; Shredded Beef Suet 2; Soft Drinks 6; Spirits 2; Table Jelly 4; Tomato Ketchup 1; Tomato Sauce 1; Tunney Fish Meat 1; Vinegar 1.

Milk. Forty-two samples of this essential commodity were taken and with the exception of eight were of excellent quality, with an average milk-fat content of 3.56 per cent and milk-solids other than milk-fat 8.71 per cent. The eight faulty samples were from four farmers selling by wholesale to two large milk proprietors with pasteurising plants. The eight samples were short in fat and solids and the analyst certified that the milks were in their natural state without any addition or subtraction. In one case it was found by "appeal to cows" that the cows were giving milk below standard, and in the others that if the morning's and evening's milks were bulked, as they would be by the purchasers, the resultant would be above standard.

Five milks were bacteriologically examined and they conformed to the standard. Three were not up to standard but samples subsequently taken were quite satisfactory.

Ice Cream. Eight samples analysed were found to be far above the minimum standard fixed which is :— Fat 5.0 per cent, Sugar 10.0 per cent and Milk-Solids 7.5 per cent. The average percentages respectively were :— 9.95, 12.54 and 10.13.

Seven of the samples, on bacteriological examination were graded :— two Grade I, four Grade II and one Grade III.

Sausages. The meat content of eight pork sausage samples ranged from 60.0 per cent to 83.8 per cent with an average of 67.78 per cent. The adopted standard is 65.0 per cent. Two were below the standard with 60.0 and 60.0 per cent meat. It was decided that no action should be taken other than a cautionary letter to each seller.

J. J. COLE,
County Inspector of Food and Drugs